

BEST AVAILABLE COPY

3/6/02

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-837)							SERIAL NO. 10-08, 992	FILING DATE	
MULTIPLE CLAIMS									
	AS FILED		AFTER EXAMINATION AND AMENDMENT		AFTER REVISION		NO.	FEE	FEE
	DEF.	DEF.	DEF.	DEF.	DEF.	DEF.			
1							51		
2							52		
3							53		
4							54		
5							55		
6							56		
7							57		
8							58		
9							59		
10							60		
11							61		
12							62		
13							63		
14							64		
15							65		
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41							91		
42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL DEF.	3		2				TOTAL DEF.	160	
TOTAL DEF.	36		9				TOTAL DEF.	96	
TOTAL DEF.	39						TOTAL DEF.	52	